PTO/SB/17 (10-07)
Approved for use through 08/30/2010. OMB 0681-0032
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE
to a collection of information unless tidleplays a valid OMB control number.

Under the Paperwork Reduction Act of	respond to a collectio	ipond to a collection of information unless it displays a valid OMB control number.						
Effective on 12/08	Complete if Known							
Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).			Application Number		10/543,129-Conf. #2627			
FEE TRANSMITTAL			Filing Date		January 26, 2006			
For FY 2008			First Named Inventor		Sang Woon SUH			
101112000					M. A. Dazenski			
Applicant claims small entity status. See 37 CFR 1.27			Art Unit		4113			
TOTAL AMOUNT OF PAYMENT (\$) 180.00			Attorney Docket	No.	1630-0488PUS1			
METHOD OF PAYMENT (check all that apply)								
Check Credit Card Money Order None Other (please identify):								
X Deposit Account Deposit Account Number: 02-2448 Deposit Account Name						Kolasch &	Birch, LLP	
For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)								
x Charge fee(s) indicated below Charge fee(s) indicated below, except for the filling fee								
Charge any additional fee(s) or underpayments of fee(s) under 37 CFR 1.16 and 1.17								
FEE CALCULATION								
1. BASIC FILING, SEARCH, AND EXAMINATION FEES								
FI	LING FEES	SEA	ARCH FEES	EXAM	INATION FEES			
Application Type Fee (\$	Small Entity Fee (\$)	Fee (\$	Small Entity Fee (\$)	Fee (\$	Small Entity Fee (\$)	Fees	Paid (\$)	
Utility 310	155	510	255	210	105			
Design 210	105	100	50	130	65			
Plant 210	105	310	155	160	80			
Reissue 310	155	510	255	620	310			
Provisional 210	105	0	0	0	0			
2. EXCESS CLAIM FEES			•	·	•		Small Entity	
Fee Description						Fee (\$)	Fee (\$)	
Each claim over 20 (including Reissues)						50	25	
Each independent claim over 3 (including Reissues)						210	105	
Multiple dependent claims Total Claims Extra Claims Fee (\$) Fee Paid (\$) Mu						370	185	
Total Claims Extra Claims	aid (\$)	Multiple Dependent Claims						
- 20 = x = Fee (\$) Fee Paid (\$) HP = highest number of total claims paid for, if greater than 20.								
Indep. Claims Extra Claims Fee (\$) Fee Paid (\$)								
-3 = X =								
HP = highest number of independent claims paid for, if greater than 3.								
3. APPLICATION SIZE FEE								
If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer								
listings under 37 CFR 1.52(e)), the application size fee due is \$260 (\$130 for small entity) for each additional 50								
sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).								
Total Sheets Extra Sheets Number of each additional 50 or fraction thereof - 100 = /50 = (round up to a whole number) x						Fee	Paid (\$)	
Non-English Specification, \$130 fee (no small entity discount)								
Other (e.g., late filing surcharge): 1806 Submission of an Information Disclosure Statement 180.00								
SUBMITTED BY Clareston No. 40 052 Tribburg (702) 207 0000								
Attorney/Agent) 40,955						(110)200 0000		
Name (Print/Type) Esther H. Chong						Date January 21, 2009		